PART B - FEE(S) TRANSMITTAL

Complete and sent	1 1 2006 4		or <u>Fax</u>	P.O. Box 14 Alexandria, (571)-273-2	ner for Pat 150 , Virginia 2 885	zents 22313-1450		
INSTRUCTIONS This for appropriate. All further co-indicated unless corrected maintenance fee notification	rm should be used for respondence including below or threeted oth	or transmitting the ISSU g the Patent, advance of erwise in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new c	OATION FEE (of maintenance or	if required). e fees will be address; and/o	Blocks 1 through 5 sh mailed to the current or (b) indicating a sepa	nould be completed whe correspondence address a trate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Fee(s) Transmittal. This certificate cannot be use papers. Each additional paper, such as an assign have its own certificate of mailing or transmission TERRENCE A. MEADOR INCAPLAW 1050 ROSECRANS STREET, STE K SAN DIEGO, CA 92106 Terrance A. Meador. Terrance A. Meador. Terrance A. Meador. August 8, 2006 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 09/771,791 01/29/2001 Scott Douglas Augustine AUGA 17000025 C/M ## TITLE OF INVENTION: SURGICAL BARRIER DEVICE INCORPORATING AN INFLATABLE THERMAL BLANKET WITH A SURGIC TO PROVIDE THERMAL CONTROL AND SURGICAL ACCESS 08/11/2096 CNGUYEN1 0000026			(s) Transmittal is being	deposited with the Unite				
SAN DIEGO, CA 92106				Terrar	nce A. M	eador.	(Depositor's name	
				August	t 8, 200)6	(Date	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTO	ORNEY DOCKET NO.	CONFIRMATION NO.	
TITLE OF INVENTION: SURGICAL BARRIER DEVICE INCORPORATING AN INFLATABLE THERMAL BLANKET WITH & SURGICAL DRAPE								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE PREV. PA	id issue the	TOTA ZOBEROS) DATE	DATE DUE	
nonprovisional	YES	\$700	\$0	_	\$0	\$700	11/02/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS	3				
GIBSON, ROY DEAN 3739 6								
1. Change of correspondence CFR 1.363). Change of corresponded corres	(1) the names of or agents OR, alte (2) the name of a registered attorney 2 registered patent	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 INCAPLAW 2 Terrance A. Meador 3						
recordation as set forth in (A) NAME OF ASSIGN ARIZANT HEALT	s an assignee is identi n 37 CFR 3.11. Comp EE HCARE INC.	fied below, no assignee letion of this form is NO	data will appear on t T a substitute for filin (B) RESIDENCE: ((Eden Pra	he patent. If arg an assignment CITY and STAT	E OR COUN inesota	TRY)	ocument has been filed fo	
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government Corporation or other private								
5. Change in Entity Status a. Applicant claims S	MALL ENTITY statu	s. See 37 CFR 1.27.	* *		<u> </u>	ITITY status. See 37 CF	(8)()	
NOTE: The Issue Fee and Finterest as shown by the rec	ublication Fec (if requords of the United Stat	ired) will not be accepte es Patent and Trademark	d from anyone other to Office.	nan the applican	t; a registered	attorney or agent; or th	e assignee or other party i	
Authorized Signature	Tevance	As Nead	or	Date _	Augu	ıst 8, 2006		
Typed or printed name Terrance A. Meador Registration No. 30,298								
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313 Under the Paperwork Reduc	-1430.							